## N03000005868

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: H.E	L.P. Animais, Inc.		
	(Name of Corporation)		
DOCUMENT NUMBER: N030	00005868	_	
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for fil	ling.	
Please return all correspondence cor	ncerning this matter to the following:		
Cheryl Crozier Treasurer/Dire	ector	<u> </u>	$\subseteq$
(Name of Pers	on)		2
H.E.L.P. Animals, Inc.	·	TARY ASSE	しのタアストン
(Name of Firm/Co	mpany)		
193 Cedar Ave.		F STATE	ロゴニニンン
(Address)		ੂੰ ⊒ੂਜ਼ <b>!</b>	ď
Orange City, Florida 32763			
(City/State and Zip	p Code)		
For further information concerning	this matter, please call:		
Nancy Wachter - President/Dire	ctor at (at (		
(Name of Person)	at ( <u>386</u> ) 216-6827 Cell (Area Code & Daytime Telephone Number	er)	
Enclosed is a check for \$35.00 made	e payable to the Florida Department of State.		
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314		

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

T Lorraine Ortiz	, hereby resign as Director		
*	, notoby rosign as	(Title)	
of H.E.L.P. Animals, Inc.			
(Name	e of Corporation)		
N0300005868 (Document Number, if known)	, a corporation organized under the	laws of the State of	
(Bocument Number, it known)			
Florida			
Lor	vause Outs (Signature of resigning officer/director)	FILED  08 APR 25 AM 10: 22  JEGRETARY OF STATE ALL AHASSEE, FLORID	

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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